

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 719745	RECEIPT DATE:	12 / 15 / 00
IA NUMBER:	PCT/ IT99 / 00330	IA FILING DATE:	10 / 19 / 99
FAMILY NAME:	IULIANETTI	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	LINO	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	04 / 15 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	IULIANETTI 1	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 2026285197
			FAX

NAME: BROWDY AND NEIMARK

STREET: 624 NINTH STREET NW SUITE 300

CITY: WASHINGTON

STATE/COUNTRY: DC ZIP: 20001

EMAIL:

APPLICATION TITLES:

FILM MADE OF HOLED PLASTIC MATERIAL THREE- DIMENTIONLLY SHAPED AND REL  
ACED MATRIX FOR ITS REALISATION

TAB TO LAST POSITION.PUSH SEND



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/719,745	<b>FILING DATE</b> 12/15/2000 <b>RULE</b> -	<b>CLASS</b> 428	<b>GROUP ART UNIT</b> 1772	<b>ATTORNEY DOCKET NO.</b> IULIANETTI 1
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## APPLICANTS

Lino Iulianetti, Torre Dei Passeri, ITALY;

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLICATION IS A 371 OF PCT/IT99/00330 10/19/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

ITALY RM 99A000229 04/15/1999

IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED \*\* 01/30/2001

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY ITALY	SHEETS DRAWING 6	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials				

## ADDRESS

001444

## TITLE

Film made of holed plastic material three- dimensionlly shaped and related matrix for its realisation

<b>FILING FEE RECEIVED</b> 430	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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